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POTENTIAL HAZARDOUS WASTE SITE TENTATIVE DISPOSITION		EPA	REGION VI	SITE NUMBER TX 10022
File this form in the regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force (EN-335); 401 M St., SW; Washington, DC 20460.				
I. SITE IDENTIFICATION				
A. SITE NAME United States Gypsum Company		B. STREET 1100 Hardy Ave.		
C. CITY Corsicana TX 0007354392		D. STATE Texas		E. ZIP CODE 75110
II. TENTATIVE DISPOSITION				
Indicate the recommended action(s) and agency(ies) that should be involved by marking 'X' in the appropriate boxes.				
RECOMMENDATION	MARK 'X'	EPA	STATE	LOCAL
A. NO ACTION NEEDED -- NO HAZARD	X	(Not CERCLA jurisdiction)		
B. INVESTIGATIVE ACTION(S) NEEDED (If yes, complete Section III.)	Refer to RCRA.			
C. REMEDIAL ACTION NEEDED (If yes, complete Section IV.)				
D. ENFORCEMENT ACTION NEEDED (If yes, specify in Part E whether the case will be primarily managed by the EPA or the State and what type of enforcement action is anticipated.)				
E. RATIONALE FOR DISPOSITION Site is the location of an active wool insulation manufacturer and an active landfill. On-site sampling was conducted on 10/17/84 which resulted in a resampling recommendation to obtain a good background sample. Another sampling mission was conducted on 8/27/87 to obtain off-site samples. The sample results thus far indicated elevated levels of lead, zinc, and arsenic north and south of the site. The route of migration is unknown at this time; however, it has been suspected to be via the air route since the contamination follows the wind patterns. More investigation is required at this site, however, since the site is active it does not fall under CERCLA jurisdiction. Therefore, the site should be referred to RCRA.				
F. INDICATE THE ESTIMATED DATE OF FINAL DISPOSITION (mo., day, & yr.)		G. IF A CASE DEVELOPMENT PLAN IS NECESSARY, INDICATE THE ESTIMATED DATE ON WHICH THE PLAN WILL BE DEVELOPED (mo., day, & yr.)		
H. PREPARER INFORMATION				
1. NAME Joe Roberto (6H-ES)		2. TELEPHONE NUMBER (214) 767-9702		3. DATE (mo., day, & yr.) 2/12/86
III. INVESTIGATIVE ACTIVITY NEEDED				
A. IDENTIFY ADDITIONAL INFORMATION NEEDED TO ACHIEVE A FINAL DISPOSITION.				
B. PROPOSED INVESTIGATIVE ACTIVITY (Detailed Information)				
1. METHOD FOR OBTAINING NEEDED ADDITIONAL INFO.	2. SCHEDULED DATE OF ACTION (mo, day, & yr)	3. TO BE PERFORMED BY (EPA, Contractor, State, etc.)	4. ESTIMATED MANHOURS	5. REMARKS
a. TYPE OF SITE INSPECTION				
(1) <u>Not CERCLA</u>	<u>jurisdiction</u>	<u>(refer to RCRA)</u>		
(2) _____	_____	_____	_____	_____
(3) _____	_____	_____	_____	_____
b. TYPE OF MONITORING				
(1) _____	_____	_____	_____	SUPERFUND FILE
(2) _____	_____	_____	_____	AUG 24 1992
c. TYPE OF SAMPLING				
(1) _____	_____	_____	_____	REORGANIZED
(2) _____	_____	_____	_____	_____



III. INVESTIGATIVE ACTIVITY NEEDED and PART B-PROPOSED INVESTIGATIVE ACTIVITY (Continued)**d. TYPE OF LAB ANALYSIS**

(1) _____

(2) _____

e. OTHER (specify)

(1) _____

(2) _____

C. ELABORATE ON ANY OF THE INFORMATION PROVIDED IN PART B (on front & above) AS NEEDED TO IDENTIFY ADDITIONAL INVESTIGATIVE WORK.**D. ESTIMATED MANHOURS BY ACTION AGENCY**

1. ACTION AGENCY	2. TOTAL ESTIMATED MANHOURS FOR INVESTIGATIVE ACTIVITIES	1. ACTION AGENCY	2. TOTAL ESTIMATED MANHOURS FOR INVESTIGATIVE ACTIVITIES
a. EPA		b. STATE	
c. EPA CONTRACTOR		d. OTHER (specify)	

IV. REMEDIAL ACTIONS**A. SHORT TERM/EMERGENCY STRATEGY (On Site & Off-Site):** List all emergency actions needed to bring site under immediate control, e.g., restrict access, provide alternate water supply, etc. See instructions for a list of Key Words for each of the actions to be used in the space below.

1. ACTION	2. EST. START DATE (mo, day, & yr)	3. EST. END DATE (mo, day, & yr)	4. ACTION AGENCY (EPA, State, Private Party)	5. ESTIMATED COST	6. SPECIFY 311 OR OTHER ACTION; INDICATE THE MAGNITUDE OF THE WORK REQUIRED
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	

B. LONG TERM STRATEGY (On Site & Off-Site): List all long term solutions, e.g., excavation, removal, ground water monitoring wells, etc. See instructions for a list of Key Words for each of the actions to be used in the spaces below.

1. ACTION	2. EST. START DATE (mo, day, & yr)	3. EST. END DATE (mo, day, & yr)	4. ACTION AGENCY (EPA, State, Private Party)	5. ESTIMATED COST	6. SPECIFY 311 OR OTHER ACTION; INDICATE THE MAGNITUDE OF THE WORK REQUIRED
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	

C. ESTIMATED MANHOURS AND COST BY ACTION AGENCY

1. ACTION AGENCY	2. TOTAL EST. MANHOURS FOR REMEDIAL ACTIVITIES	3. TOTAL EST. COST FOR REMEDIAL ACTIVITIES	1. ACTION AGENCY	2. TOTAL EST. MANHOURS FOR REMEDIAL ACTIVITIES	3. TOTAL EST. COST FOR REMEDIAL ACTIVITIES
a. EPA			b. STATE		
c. PRIVATE PARTIES			d. OTHER (specify)		